

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012625

FILED
Jan 29, 2006
Secretary of State

Entity Name: AURORA MEDICAL IMAGING LLC

Current Principal Place of Business:

4634 SUMMERDALE BLVD
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

4634 SUMMERDALE BLVD
PACE, FL 32571

New Mailing Address:

FEI Number: 59-3738234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RASMUSSEN, JOHN
4634 SUMMERDALE BLVD
PACE, FL 32571 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RASMUSSEN, JOHN F
Address: 4634 SUMMERDALE BLVD
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN RASMUSSEN

MGRM

01/29/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date